

JAN 16 2007

BLAKELY SOKOLOFF TAYLOR & ZAFMAN LLP

TELEPHONE: (503) 439-8778

INTELLECTUAL PROPERTY LAW
12400 WILSHIRE BOULEVARD, 7TH FLOOR
LOS ANGELES, CA 90025

FACSIMILE: (503) 439-6073

FACSIMILE COVER SHEET

Deliver to: PHILIPPE, Gims S., USPTO

Art Group: 2621

Facsimile No.: (571) 273-8300

Date: January 16, 2007

From: Paul A. Mendonsa, Reg. No. 42,879

Our Docket No.: 42P15475

Number of pages 17 including this sheet.

Application No.: 10/600 518Filing Date: 6/19/2003

Docket Due Date(s): 1/16/2007 |

Enclosed are the following documents:

☒ Amendment: Response (13 pgs)
☐ Appeal Brief (pgs)
☐ Application: _____
 (pgs) w/cover & abstract
☐ Assignment & Cover Sheet (pgs)
☒ Certificate of Facsimile
☐ Continued Prosecution Application (CPA)
☐ Declaration & POA (pgs)
☐ Drawings: sheets, figures
☐ Extension of Time: _____
☒ Fee Transmittal (in duplicate)
☐ IDS & PTO/SB08 (pgs)
☐ Other _____

☐ Issue Fee Transmittal
☐ Notice of Appeal
☐ Petition for: _____
☐ Request for Continued Examination (RCE)
☐ Reply Brief (pgs)
☐ Request & Certification Under 35 USC 122(b)(2)(B)(i)
☐ Request to Rescind Previous Nonpublication Request
☐ Response to Notice of Missing Parts & Formalities Letter
☐ Response to Written Opinion (pgs)
☐ Terminal Disclaimer
☐ Transmittal of Publication Fee Due
☒ Transmittal Letter

CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.84)

I hereby certify that this correspondence is being transmitted by facsimile on the date shown below to the United States Patent and Trademark Office.

Paul A. Mendonza 1/16/2007
Paul A. Mendonza Date

Confidentiality Note: The documents accompanying this facsimile transmission contain information from the law firm of Blakely, Sokoloff, Taylor & Zafman which is confidential or privileged. The information is intended to be for the use of the individual or entity named on this transmission sheet. If you are not the intended recipient, be aware that any disclosure, copying, distribution or use of the contents of this faxed information is prohibited. If you have received this facsimile in error, please notify us by telephone immediately so that we can arrange for the retrieval of the original documents at no cost to you.

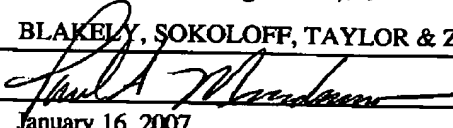
If you do not receive all the pages, or if there is any difficulty in receiving, please call: (503) 439-8778 and ask for Paul A. Mendonça.

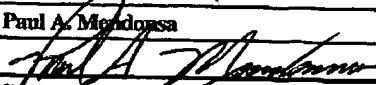
RECEIVED
CENTRAL FAX CENTER

JAN 16 2007

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application No.	10/600,518	
	Filing Date	June 19, 2003	
	First Named Inventor	Michael Castillo	
	Art Unit	2621	
	Examiner Name	PHILIPPE, Gims S.	
Total Number of Pages in This Submission	16	Attorney Docket Number	42P15475

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply 13 PGS <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">Fax Cover Sheet</div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Paul A. Mendonsa, Reg. No. 42,879 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	January 16, 2007

CERTIFICATE OF MAILING/TRANSMISSION			
I hereby certify that this correspondence is being transmitted via facsimile on the date shown below to the United States Patent and Trademark Office.			
Typed or printed name	Paul A. Mendonsa	Date	January 16, 2007
Signature		Date	January 16, 2007

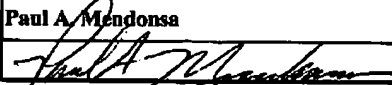
Based on PTO/SB/21 (09-04) as modified by Blakely, Sokoloff, Taylor & Zafman (mcs) 10/12/2006.
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

JAN 16 2007

FEE TRANSMITTAL for FY 2006		<i>Complete if Known</i>	
<small>Patent fees are subject to annual revision.</small>		Application Number	10/600,518
		Filing Date	June 19, 2003
		First Named Inventor	Michael Castillo
		Examiner Name	PHILIPPE, Gims S.
		Art Unit	2621
		Attorney Docket No.	42P15475
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.			
TOTAL AMOUNT OF PAYMENT (\$)			

METHOD OF PAYMENT <i>(check all that apply)</i>	
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>02-2666</u> Deposit Account Name: <u>Blakely, Sokoloff, Taylor & Zafman LLP</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) <input type="checkbox"/> Credit any overpayments	
under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.	

FEE CALCULATION					
Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
2053	130	2053	130	Non-English specification	
1251	120	2251	60	Extension for reply within first month	
1252	450	2252	225	Extension for reply within second month	
1253	1,020	2253	510	Extension for reply within third month	
1254	1,590	2254	795	Extension for reply within fourth month	
1255	2,160	2255	1,080	Extension for reply within fifth month	
1401	500	2401	250	Notice of Appeal	
1402	500	2402	250	Filing a brief in support of an appeal	
1403	1,000	2403	500	Request for oral hearing	
1451	1,510	2451	1,510	Petition to institute a public use proceeding	
1480	130	2460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
1809	790	1809	395	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	790	2810	395	For each additional invention to be examined (37 CFR § 1.129(b))	
Other fee (specify) _____					
SUBTOTAL (2)					(\$)

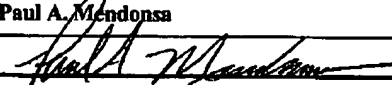
SUBMITTED BY		<i>Complete (if applicable)</i>			
Name (Print/Type)	Paul A. Mendonsa	Registration No. (Attorney/Agent)	42,879	Telephone	(503) 439-8778
Signature		Date	01/16/07		

Based on PTO/BB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (July 12/15/2004).
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

FEE TRANSMITTAL for FY 2006		<i>Complete if Known</i>	
<small>Patent fees are subject to annual revision.</small>		Application Number	10/600,518
		Filing Date	June 19, 2003
		First Named Inventor	Michael Castillo
		Examiner Name	PHILIPPE, Gims S.
		Art Unit	2621
		Attorney Docket No.	42P15475
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.			
TOTAL AMOUNT OF PAYMENT (\$)			

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>02-2666</u> Deposit Account Name: <u>Blakely, Sokoloff, Taylor & Zafman LLP</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20. <input type="checkbox"/> Credit any overpayments	

FEE CALCULATION					
Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.	
2053	130	2053	130	Non-English specification	
1251	120	2251	60	Extension for reply within first month	
1252	450	2252	225	Extension for reply within second month	
1253	1,020	2253	510	Extension for reply within third month	
1254	1,590	2254	795	Extension for reply within fourth month	
1255	2,160	2255	1,080	Extension for reply within fifth month	
1401	500	2401	250	Notice of Appeal	
1402	500	2402	250	Filing a brief in support of an appeal	
1403	1,000	2403	500	Request for oral hearing	
1451	1,510	2451	1,510	Petition to institute a public use proceeding	
1460	130	2460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
1809	790	1809	395	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	790	2810	395	For each additional invention to be examined (37 CFR § 1.129(b))	
Other fee (specify) _____					
SUBTOTAL (2)					(\$)

SUBMITTED BY		<i>Complete (if applicable)</i>			
Name (Print/Type)	Paul A. Mendonsa	Registration No. (Attorney/Agent)	42,879	Telephone	(503) 439-8778
Signature		Date	01/16/07		

Based on PTO/BB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (w/r) 12/15/2004.
SEND TO: Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1460

RECEIVED
CENTRAL FAX CENTER

JAN 16 2007

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 10/600,518 Confirmation No. 8614
Applicant : Michael Castillo, et al.
Filed : June 16, 2003
TC/A.U. : 2621
Examiner : Philippe, Gims S.

Docket No. : 42P15475
Customer No. : 008791

Commissioner For Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT

In response to the Office Action mailed October 16, 2006, please enter this amendment and consider the following remarks.

Amendments to the Claims are reflected in the listing of claims that begins on page 2 of this paper.

Remarks begin on page 11 of this paper.

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office at:

(571) 273-8300
Facsimile Number
Signature *Philippe Gims S.* Date JAN 16, 2007